

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF  
CORRESPONDENCE ADDRESS  
*Application***

Address to: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Application Number	10/525,726 – Conf. No. 3700
Filing Date	November 25, 2005
First Named Inventor	Heinz Von der Kammer
Art Unit	1645
Examiner Name	Not Yet Assigned
Attorney Docket No.	37998-237386

Please change the Correspondence Address for the above-identified application to:

The address associated with Customer Number: 26694

**OR**

<input type="checkbox"/>	Firm or Individual Name				
Address					
City		State		Zip	
Country					
Telephone				Email	

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

Applicant/Inventor  
 Assignee of record of the entire interest.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
 Attorney or agent of record. Registration Number 54,262.  
 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_.

Signature

Typed or Printed Name

Kavita B. Lepping

Date January 30, 2007

Telephone (202) 344-4000

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of 1 Form is/are submitted.